



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

741890-18

CERTIFICATE OF MAILING OR  
TRANSMISSION  
[37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Non-Fee Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300 on \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

In re Application of: **Damien ROSNEY et al.**Application Number: **09/936,840**Filed: **January 7, 2002**

For:

**A SURGICAL ACCESS DEVICE**Group Art Unit: **3731**Examiner: **Vi X. Nguyen**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- |   |                  |
|---|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)                 | \$ _____         |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)               | \$ _____         |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) | \$ <u>510.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)             | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)            | \$ _____         |

☒ Applicant claims small entity status.☐ A check to cover the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380.  
I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration No. 36,092

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

Signature

Tim L. Brackett, Jr.

Typed or printed name

October 19, 2005

Date

202-585-8000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

10/20/2005 JADD01 00000004 192380 09936840

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